

EXHIBIT 3



CHARLESTON POLICE DEPARTMENT INVESTIGATIVE STATEMENT FORM



INCIDENT NUMBER:	DATE TAKEN:	TIME STARTED:	TIME COMPLETED:	THIS IS	OF A STATEMENT CONSISTING OF
I19071601	07/16/13	2340	2348	PAGE 1	1 TOTAL PAGES

WITNESS INFORMATION

NAME: [REDACTED] RACE: W SEX: M DATE OF BIRTH: [REDACTED] 08/11/30 AGE: 30
 SOCIAL SECURITY NO: [REDACTED] -547 HOME PHONE: [REDACTED] -973 WORK PHONE: [REDACTED]
 ADDRESS: [REDACTED] 1st Ave APT: [REDACTED] CITY: Char. STATE: W.V. ZIP CODE: 25302

I, [REDACTED] am giving the following voluntary statement to CPD
 a police officer. No threats or promises have been made to me, and I understand that this statement can be used as
 evidence in a Court of Law. My statement is being given as a result of my being a:

☐ VICTIM ☒ WITNESS ☐ SUSPECT ☐ DRIVER ☐ PASSENGER ☐ PEDESTRIAN

man Driving a carlier Being Chased by
 CPD almost ran me over on corner of Florida St
 and central Ave and circled the Block almost
 hitting me a second time on corner of
 Florida and madison st after police stopped him
 I contacted them about the information I seen
 during witch time I feared I was going to
 be hurt if not killed.

I have read the above statement consisting of 1 pages, written in ☐ pencil ☒ ink, and I certify it to be true and
 correct to the best of my knowledge.

TIME SIGNED: 11:44pm WITNESS: [Signature]

CPD 140 REVISED 7/93

(USE ADDITIONAL STATEMENT FORMS IF NEEDED)